

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 22, 2004 8:00 am**  
**Secretary of State**

03-22-2004 90023 030 \*\*\*\*61.25

**DOCUMENT # 790674**

1. Entity Name  
**WASHINGTON COUNTY FARM BUREAU LIMITED  
AGRICULTURAL ASSOCIATION**



Principal Place of Business  
**1361 JACKSON AVE  
CHIPLEY, FL 32428**

Mailing Address  
**1361 JACKSON AVE  
CHIPLEY, FL 32428**

**54020171**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03182004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number  
**59-1058078**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CHRISTMAS, R B  
1916 PALMVIEW RD  
COTTONDALE, FL 32431**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
P  
CHRISTMAS, BRUCE  
1916 PALMVIEW RD  
COTTONDALE, FL 32431 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VP  
Todd Abbott  
906 Joseph Drive  
Chipley, FL 32428 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
PADGETT, CARLTON  
1754 PADGETT CIRCLE  
CHIPLEY, FL 32428 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
Brian Solger  
1109 Orange Hill Road  
Chipley, FL 32428 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
FISHER, GEORGE  
982 HUTCHINS LANE  
CHIPLEY, FL 32428 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TDS  
George Fisher  
982 Hutchins Lane  
Chipley, FL 32428 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TDS  
WILLIAMS, LAVERNE  
2 HWY 77  
CHIPLEY, FL 32428 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
Ann Christmas  
1916 Palmview Road  
Cottondale, FL 32431 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
SLOAN, CHARLES  
811 HWY 277 SOUTH  
CHIPLEY, FL 32428 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
  
  
  
  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
HIGHTOWER, ALIENE  
3863 SWINDEL RD  
CARYVILLE, FL 32427 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
  
  
  
  
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowerment.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/19/04 850-638-1256  
Date Daytime Phone #